## REGISTRATION

Certified Maintenance Provider/Qualified Homeowner Maintenance Provider Course

The Mississippi State Department of Health, Division of On-Site Wastewater acknowledges your request to register as a Certified Maintenance Provider in the State of Mississippi. The Division must first receive from the Applicant:

- ► An Application (Form 454 E) provided by the Division
- ▶ \$125.00 fee (check or money order) for registration and examination
- I. Once the Division receives your completed Application and registration fee, the Division will mail the following information in your Registration Packet:
  - Notice (location/map, date and time)
  - A copy of the Mississippi Individual On-site Wastewater Disposal Law
  - A copy of the Regulation Governing Residential On-site Wastewater Disposal Systems: Certification
  - Appendixes (Design Standards)

THE LAW, CERTIFICATION REGULATION AND APPENDIXES WILL BE YOUR STUDY GUIDE. YOU ARE RESPONSIBLE FOR BRINGING THIS MATERIAL TO THE 1-DAY COURSE. THE EXAMINATION IS CLOSED BOOK.

- II. Once you have received the Registration Packet from the Division prepare to:
  - Attend scheduled 1-day course
- III. Once the Division has graded your exam, you will receive by mail within 30 days either:
  - Notification of Passing
  - Notification of Failing
- IV. If you receive the Notification of Passing, you will need to submit to the Division within 30 days:
  - \$400.00 for Certificate (Every 2 years)
  - A copy of General Business Liability Insurance policy in effect with liability limits of \$50,000 per occurrence and at least \$100,000 in total aggregate amount. **Section 41-67-25(3)(d)**, except QHMP
  - Verification from Certified Manufacturer as to having met training requirements and is Authorized and Qualified for the manufacturer's specific product
  - A sample contract and/or list of services that you will be providing to the homeowner, except QHMP

**NOTE:** You will **not** receive your Certificate or CEU/PDH schedule without submitting the above items to the Division. If more than **31 days** lapse, you will be required to repeat the above process. Your Certificate will expire on **December 31** of each year; the Division will provide notification **60 days** prior to expiration.

- V. If you receive the Notification of Failing, you will receive the following:
  - > Results
  - Notice (location/map, date and time)

## Mississippi State Department of Health

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